

PTO/SB/01 (04-05)

Approved for use through 04/30/2007. OMB 0851-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION DECLARATION BY THE INVENTORDocket Number (Optional)
4320-241

I hereby declare that:

Each inventor's residence, mailing address and citizenship are stated below next to their name.

I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in patent number 5,783,083, granted July 21, 1998, and for which a reissue patent is sought on the invention entitled VERTICAL CYLINDRICAL SKIN OF HOLLOW FIBER MEMBRANES AND METHOD OF MAINTAINING CLEAN FIBER SURFACES,

the specification of which

☐ is attached hereto.

☒ was filed on July 20, 2000 as reissue application number 08 / 621,234 and was amended on April 2, 2001; January 22, 2002; October 2, 2002; June 2, 2003; June 4, 2003; January 9, 2004; and February 23, 2005.

(If applicable)

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

☐ I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☒ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

The claims of the issued patent failed to include claims to a system having a reservoir, an assembly of membranes, a device operable to apply a suction to the membranes and an aeration means. The original patent is broadened by the addition of claims to such a system, the added claims not having all of the elements of any original claim.

[Page 1 of 2]

This collection of information is required by 37 CFR 1.176. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/81 (04-05)

Approved for use through 04/30/2007. OMB 0651-0003

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)		Docket Number (Optional) 4320-241	
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.			
Note: To appoint a power of attorney, use form PTO/SB/81.			
Correspondence Address: Direct all communications about the application to:			
<input checked="" type="checkbox"/> The address associated with Customer Number:		1059	
OR			
<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	ZIP	
Country			
Telephone	Email		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.			
Full name of sole or first inventor (given name, family name)			
Wayne Jerald HENSHAW			
Inventor's signature <i>Wayne Jerald Henshaw</i>		Date 18-08-2005	
Residence	Canada	Citizenship	Canadian
Mailing Address			
5109 Bayfield Cr., Burlington, Ontario L7N 3J5, Canada			
Full name of second joint inventor (given name, family name)			
Mallivaganam MAHENDRAN			
Inventor's signature <i>M. Mahendran</i>		Date 18-08-2005	
Residence	Canada	Citizenship	Canadian
Mailing Address			
5633 Churchill Meadows Blvd., Mississauga, Ontario L5M 7A7, Canada			
Full name of third joint inventor (given name, family name)			
Henry BEHMANN			
Inventor's signature <i>Henry Behmann</i>		Date 19-08-2005	
Residence	Canada	Citizenship	Canadian
Mailing Address			
4436 VICTORIA RD. SOUTH. RR #1, Puslinch, Ontario N0B 2J0, Canada			
<input type="checkbox"/> Additional joint inventors or legal representative(s) are named on separately numbered sheets form PTO/SB/02A or 02LR attached hereto.			

(Page 2 of 2)